										Application or Docket Number				
PATENT APPLICATION FEE DETERMANATION RECO									RD 1.					
Effective atober.1, 2000										09	5	512,088		
	CLAIMS AS FILED - PART I										Y	OTH	RTHAN	
FOR		·	(Column 1) (Column 2)					¬'	TYP			R SMAL	LENTITY	
ron			NUMBER FILED			NUMBER EXTRA			RATE	FEE		RATE	FEE	
BASIC FEE										138	 ე	R	:770	
TOTAL CLAIMS			minus 20=			•			X\$ 9:		o	R X\$18=		
INDEPENDENT CLAIMS				minu	ıs 3 =	•			XN			R >86	:	
MULTIPLE DEPENDENT CLAIM PRESENT							· · ·		1		- 1 ·			
* If the difference in column 1 is less than zero, enter "0" in column 2									TOTAL	_	0	S. (C)		
	CLAIMS AS AMENDED - PART II												· <u>L</u>	
B	. :	(Col	ımn 1) (Column 2)				(Column 3)).	SMAL	LENTITY	OF		R THAN . ENTITY	
≯ B			AIMS AINING			IGHEST YUMBER	PRESENT	1		ADDI			ADDI-	
EN EN			TER DMENT		PR	EVIOUSLY AID FOR	EXTRA		RATE	TIONA		RATE	TIONAL	
AMENDMENT-A	•		0	Minus	**	20		.]	X\$ 9=		OF	X\$18=	,,,,,	
Indep	endent	4.	2	Minus	***	3	=		X 4 3=	†	1			
FIRS	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									 	OF	×96=		
									+145=		OR	134 10		
4		_ •							TOTAL ADDIT, FEE		OR	ADDIT. FEE		
	(Column 1) (Column 2) (Column 3) CLAIMS (SOCIAL HIGHEST)													
		REMA AFI	INING TER DMENT		PRE	UMBER EVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
Total Indepo		*)	Minus	1-77 	ND FOR				FEE	-		FEE	
Indep	endent	•		Minus	***	<u>~</u>	8		X\$ 9=	<u> </u>	OR			
FIRST	PRESE	NTATIO	OF M	JUTIPLE DE	PENDE			-	×43		OR	x.86	*	
								1	+45₌		OR	290		
	~				. 11			A	TOTAL DOIT, FEE		OR	TOTAL ADDIT, FEE		
		(Colur	nn 1) 1	2-2-(lumn 2)	(Column 3)				_	, COII. , CL		
		REMA	NING			GHEST MBER	PRESENT	ſ		ADDI-			ADDI-	
		AFT				VIOUSLY ID FOR	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
TOLAI		<u> </u>		Minus	**	20	٠	Γ	X\$ 9=		OR	X\$18=		
Indepe		TATION	_	Minus	***	3	-		×43			86		
1.40	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR			
If the entry	If the entry in column 1 is less than the entry in column 2, write "O" in column 3.								1014		OR	+290		
"If the Title	If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number									·	OR ,	DOTT. FEE		
ine 76gh	Heat Numb	er Previo	rely Peld	For (Total or	Indepen	dent) is the	highest number (found	OIT. FEE L	ropriste box	in ook	mn t.	.	
MI PINA			•				_		•					